SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) RGA Reinsurance Company Federal PAC Full Name (Last, First, Middle Initial) Sandra E Hubert Date of Receipt Mailing Address 16600 Swingley Ridge 2016 31 City Zip Code State Transaction ID: PR135580819240 MO Chesterfield 63017 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer Occupation VP, Strategic Planning and Execution **RGA Reinsurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) 326.91 Other (specify) Full Name (Last, First, Middle Initial) B. Suzanne Scanlon-Pope Date of Receipt Mailing Address 16600 Swingley Ridge 80 31 2016 City State Zip Code Transaction ID: PR163195719240 Chesterfield MO 63017 Amount of Each Receipt this Period FEC ID number of contributing 38.46 federal political committee. Memo Item Name of Employer Occupation **RGA Reinsurance Company** SVP, Global IT Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) Other (specify) 326,91 Full Name (Last, First, Middle Initial) c. Dean S Abbott Date of Receipt Mailing Address 16600 Swingley Ridge 80 31 2016 City Zip Code State Transaction ID: PR181508919240 MO Chesterfield 63017 Amount of Each Receipt this Period FEC ID number of contributing С 115.38 federal political committee. Memo Item Name of Employer Occupation SVP & Chief Actuary US Group Reinsuran **RGA Reinsurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$57.69 Bi-Weekly) 980.73 Other (specify) 192.30 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....